

Washington State Health Benefit Exchange
Presented for discussion with the Plan Management Workgroup Meeting
September 25, 2012

Quality Improvement Strategies –

- how to satisfy the “quality” certification criterion...
- for Exchange plan years 2014 and 2015.

Demonstrating Implementation of a Quality Improvement Strategy

To offer qualified health plans, a QHP issuer needs to document that it has implemented each of these quality improvement strategies from Section 1311(g)(1) of the Affordable Care Act:

- A. Improve health outcomes.** The issuer must describe improvements in health outcomes through activities that include quality reporting, effective case management, care coordination, chronic disease management, medication and care compliance initiatives, including through the use of the medical home model, for treatment or services.
- B. Prevent hospital readmissions.** The issuer must describe the prevention of hospital readmissions through the implementation of a comprehensive hospital discharge program. The program may include patient-centered education and counseling, comprehensive discharge planning, and post discharge reinforcement by an appropriate health care professional.
- C. Improve patient safety/reduce medical errors.** The issuer must describe implemented activities that improve patient safety and reduce medical errors. The activities may include the appropriate use of best clinical practices, evidence based medicine, and health information technology.
- D. Improve wellness and health promotion.** The issuer must describe the implementation of wellness and health promotion activities.
- E. Reduce health disparities and health care disparities.** The issuer must describe activities implemented to reduce health and health care disparities. The activities may include the use of language services, community outreach, or cultural competency trainings.

Quality Improvement Strategy Form

Each issuer would complete an electronic version of the following form during the certification process and submit it to Health Benefit Exchange:

Strategy	Quality Improvement Activity
<p>Check each box satisfied by this Quality Improvement Activity:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Outcomes <input type="checkbox"/> Readmissions <input type="checkbox"/> Safety <input type="checkbox"/> Wellness <input type="checkbox"/> Disparities 	<p>A few ground rules for providing the description</p> <p>A uniform box of adequate size will be made available to an issuer. (The box will be larger than this sample box.)</p> <p>An issuer will need to:</p> <ul style="list-style-type: none"> • Briefly describe the Quality Improvement Activity and how it achieves the checked Strategy(s) Describe the Quality Improvement Activity in a way that makes evident how the checked strategy, .e.g., outcomes, is achieved. • The Quality Improvement Activity has to be currently in use somewhere in your company. (The Activity does not have to be in use in Washington State.) • The description may include results. • The description will be posted for consumers on the HBE web pages.

The following from the ACA is provided as background information for the Plan Management Workgroup discussion:

1311(c)(1)(E) implement a quality improvement strategy described in subsection (g)(1);

1311(g)(1) STRATEGY DESCRIBED.—A strategy described in this paragraph is a payment structure that provides increased reimbursement or other incentives for—

(A) improving health outcomes through the implementation of activities that shall include quality reporting, effective case management, care coordination, chronic disease management, medication and care compliance initiatives, including through the use of the medical home model, for treatment or services under the plan or coverage;

(B) the implementation of activities to prevent hospital readmissions through a comprehensive program for hospital discharge that includes patient-centered education and counseling, comprehensive discharge planning, and post discharge reinforcement by an appropriate health care professional;

(C) the implementation of activities to improve patient safety and reduce medical errors through the appropriate use of best clinical practices, evidence based medicine, and health information technology under the plan or coverage;

(D) the implementation of wellness and health promotion activities; and

(E) As added by section 10104(g). the implementation of activities to reduce health and health care disparities, including through the use of language services, community outreach, and cultural competency trainings.